ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION	5mg		1/12/00	
O.I.P.E. CLASSIFIER		48	1/20/05	
FORMALITY REVIEW			7/27	
RESPONSE FORMALITY REVIEW	92	20330	7015/100	
	OF	59227	17/57/65	

INDEX OF CLAIMS

•	Rejected	N	Non-elected
=	Allowed	I	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

Claim Date	Claim Date	Claim Date
= 03 D O C O 7 P	G T	T-1 T-1 T-1 T-1 T-1-1-1
Pinal Original	Onginal	Final
	51	101
	52	102
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	55	105
5 6 7	56	106
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10 / 11 / 1	60	110
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32	82	132
33	83	133
34	1 84 + + + + + + + + + +	134
35	85	135
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39	89	1.39
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If more than 150 claims or 10 actions staple additional sheet here